

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D. B. K		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	C. Y. C.	JCE530	10-25-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original		Final	
1	10/16/03	51		101	
2	✓	52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
11		61		111	
12	✓	62		112	
13		63		113	
14		64		114	
15	N	65		115	
16		66		116	
17		67		117	
18		68		118	
19		69		119	
20		70		120	
21		71		121	
22		72		122	
23		73		123	
24		74		124	
25	✓	75		125	
26	N	76		126	
27	N	77		127	
28	N	78		128	
29	✓	79		129	
30		80		130	
31		81		131	
32		82		132	
33		83		133	
34		84		134	
35		85		135	
36		86		136	
37		87		137	
38		88		138	
39	✓	89		139	
40	N	90		140	
41	N	91		141	
42	N	92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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